

County: Fond Du Lac
 GRANCARE NURSING & REHAB CENTER
 517 EAST DIVISION STREET

Facility ID: P080

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FOND DU LAC 54935 Phone: (920) 921-6800

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 75

Total Licensed Bed Capacity (12/31/00): 75

Number of Residents on 12/31/00: 37

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? Yes

Average Daily Census: 40

Corporation

Skilled

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%
-----	-----	-----	-----	-----	-----	-----	-----	-----
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		51.4
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		37.8
Supp. Home Care-Household Services	No	Developmental Disabilities	2.7	Under 65	5.4	More Than 4 Years		10.8
Day Services	No	Mental Illness (Org./Psy)	13.5	65 - 74	2.7			-----
Respite Care	Yes	Mental Illness (Other)	2.7	75 - 84	32.4			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	13.5	Full-Time Equivalent		
Congregate Meals	Yes	Cancer	5.4		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	16.2		100.0	(12/31/00)		
Other Meals	No	Cardiovascular	18.9	65 & Over	94.6	-----		
Transportation	Yes	Cerebrovascular	21.6	-----	-----	RNs		15.6
Referral Service	No	Diabetes	8.1	Sex	%	LPNs		9.6
Other Services	No	Respiratory	5.4	-----	-----	Nursing Assistants		
Provide Day Programming for		Other Medical Conditions	5.4	Male	21.6	Aides & Orderlies		
Mentally Ill	No		-----	Female	78.4			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents	
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate		No.
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	8	100.0	\$140.00	0	0.0	\$0.00	1	100.0	\$130.00	10	35.7	\$122.00	0	0.0	\$0.00	19	51.4%
Intermediate	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	12	42.9	\$122.00	0	0.0	\$0.00	12	32.4%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	3	10.7	\$122.00	0	0.0	\$0.00	3	8.1%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	3	10.7	\$85.00	0	0.0	\$0.00	3	8.1%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	8	100.0		0	0.0		1	100.0		28	100.0		0	0.0		37	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing Assistance of	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	% Independent	One Or Two Staff		
Private Home/No Home Health	13.4	Daily Living (ADL)				
Private Home/With Home Health	0.0	Bathing	0.0	78.4	21.6	37
Other Nursing Homes	3.1	Dressing	16.2	67.6	16.2	37
Acute Care Hospitals	77.3	Transferring	29.7	56.8	13.5	37
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	21.6	59.5	18.9	37
Rehabilitation Hospitals	3.1	Eating	62.2	35.1	2.7	37
Other Locations	3.1	*****				
Total Number of Admissions	97	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter		0.0	Receiving Respiratory Care	21.6
Private Home/No Home Health	3.7	Occ/Freq. Incontinent of Bladder	51.4		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	36.1	Occ/Freq. Incontinent of Bowel	16.2		Receiving Suctioning	0.0
Other Nursing Homes	13.0				Receiving Ostomy Care	0.0
Acute Care Hospitals	12.0	Mobility			Receiving Tube Feeding	0.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained		0.0	Receiving Mechanically Altered Diets	16.2
Rehabilitation Hospitals	0.0					
Other Locations	5.6	Skin Care			Other Resident Characteristics	
Deaths	29.6	With Pressure Sores		0.0	Have Advance Directives	94.6
Total Number of Discharges		With Rashes		8.1	Medications	
(Including Deaths)	108				Receiving Psychoactive Drugs	62.2

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	Proprietary			50-99		Skilled		Facilities	
	This Facility	Peer Group	Ratio	Peer Group	Ratio	Peer Group	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	53.3	83.7	0.64	86.6	0.62	87.0	0.61	84.5	0.63
Current Residents from In-County	86.5	75.1	1.15	69.4	1.25	69.3	1.25	77.5	1.12
Admissions from In-County, Still Residing	16.5	18.7	0.88	19.5	0.84	22.3	0.74	21.5	0.77
Admissions/Average Daily Census	242.5	152.8	1.59	130.0	1.87	104.1	2.33	124.3	1.95
Discharges/Average Daily Census	270.0	154.5	1.75	129.6	2.08	105.4	2.56	126.1	2.14
Discharges To Private Residence/Average Daily Census	107.5	59.1	1.82	47.7	2.26	37.2	2.89	49.9	2.16
Residents Receiving Skilled Care	51.4	90.6	0.57	89.9	0.57	87.6	0.59	83.3	0.62
Residents Aged 65 and Older	94.6	95.0	1.00	95.4	0.99	93.4	1.01	87.7	1.08
Title 19 (Medicaid) Funded Residents	0.0	65.4	0.00	68.7	0.00	70.7	0.00	69.0	0.00
Private Pay Funded Residents	75.7	23.2	3.26	22.6	3.34	22.1	3.42	22.6	3.35
Developmentally Disabled Residents	2.7	0.8	3.45	0.7	3.78	0.7	3.79	7.6	0.35
Mentally Ill Residents	16.2	31.4	0.52	35.9	0.45	37.4	0.43	33.3	0.49
General Medical Service Residents	5.4	23.2	0.23	20.1	0.27	21.1	0.26	18.4	0.29
Impaired ADL (Mean)	45.4	48.9	0.93	47.7	0.95	47.0	0.97	49.4	0.92
Psychological Problems	62.2	44.1	1.41	49.3	1.26	49.6	1.25	50.1	1.24
Nursing Care Required (Mean)	5.7	6.5	0.88	6.6	0.87	7.0	0.82	7.2	0.80